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Patent Number

Inventor: Ryo NIITSUMA et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** MORRISON & FOERSTER LLP

Alex Chartove

PHONE: (703) 760-7744**Attorney Dkt. #:** 116692000900**PAGES (Including Cover Sheet):** 15**CONTENTS:** COPY OF ALL PAPERS FILED MAY 10, 2005
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Application No. (if known): 09/961,309

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Atty Docket No.: 116692000900

Inventor: Ryo NIITSUMA et al.

Application No.: 09/961,309

Filing Date: September 25, 2001

Title: APPARATUS, METHOD AND PROGRAM FOR CREATING INFORMATION TO
BE PROVIDED

Documents Filed:

TRANSMITTAL (1 page)

FEE TRANSMITTAL (1 page)

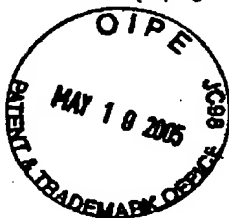
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AMENDMENT UNDER 37 CFR 1.111 (9 pages)

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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>	Application Number	09/961,309
	Filing Date	September 25, 2001
	First Named Inventor	Ryo NIITSUMA
	Art Unit	2145
	Examiner Name	S. M. Collins
	Attorney Docket Number	116692000900
Total Number of Pages in This Submission		12

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
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Signature			
Printed name	Alex Chartove		
Date	May 10, 2005	Reg. No.	31,942

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 09/961,309	Filing Date September 25, 2001
TOTAL AMOUNT OF PAYMENT (\$) 120.00		First Named Inventor Ryo NIITSUMA	Examiner Name S. M. Collins
		Art Unit 2145	Attorney Docket No. 116692000900

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison & Foerster LLP</u>	
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<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity Fee (\$)	Small Entity Fee (\$)
Fee Description Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
_____		_____		_____		_____	
Indep. Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
_____		_____		_____		_____	
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee (\$)	
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- 100 = _____		/ 50 = _____		(round up to a whole number) x _____		= _____	
						Fee Paid (\$)	
4. OTHER FEE(S)						Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)						_____	
Other (e.g., late filing surcharge): 1251 Extension for response within first month						120.00	

SUBMITTED BY			
Signature 	Registration No. (Attorney/Agent)	31,942	Telephone (703) 760-7744
Name (Print/Type) Alex Chartove			Date May 10, 2005

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